FAVAILABLE COPY)

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

		CLAIMS AS	S FILED - (Column		RT I (Column 2)			SMALL ENTITY TYPE				R THAN L ENTITY	
TOTAL CLAIMS						THE CASE THE STATE OF		RATE	FEE	OR	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00	
то	TAL CHARGEA	BLE CLAIMS] <i>U</i> minus 20=		* 0			X\$ 9=		OR	X\$18=		
IND	EPENDENT CL	AIMS	/ mi	nus 3 =	· 0			X40=		OR	X80=		
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT					+135=			.070		
* If	the difference	in column 1 is	less than zero, enter "0" in o			olumn 2				OR.	+270=		
	C	I AIMS AS A	MENDED - PART II				TOTAL	-	OR	TOTAL OTHER	TUAN		
		(Column 1)	(Column 2)			(Column 3)		SMALL E	ENTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	:	RATE	ADDI- TIONAL FEE	
NDN	Total	*	Minus	**	4.4.	=		X\$ 9=		OR	X\$18=		
AME	Independent	*	Minus	***	5 01 4 11 4	=		X40=		OR	X80=		
	FIRST PRESE	NTATION OF MI	JUIPLE DEI	PENDEN	CLAIM			+135=		OR	+270=		
			: AV		BLE	COPY	/	TOTAL	_	OD.	TOTAL		
		(Column 1)		(Colu	mn 2)	(Column 3)		ADDIT. FEE			ADDIT. FEE		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI PAID	IBER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	·Q1	Minus	**		=		X\$ 9=		OR	X\$18=		
AME	Independent	·) (Minus	***		<u> -</u>		X40=		OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT C				CLAIM		1	+135=			+270=		
()								TOTAL		OR	TOTAL		
		(California)		(O-l	O\	(O - l 0)		ADDIT. FEE		OR	ADDIT. FEE		
ပ		(Column 1) CLAIMS		(Colu	HEST	(Column 3)	1 1	1	ADDI-	!	r	ADDI	
ENT (REMAINING AFTER AMENDMENT			IBER OUSLY FOR	PRESENT EXTA	7	RATE	TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	· M	mosl	H.	5	#HU	И	X\$ 9=		OR	X\$18=	1 66	
AME	Independent	. //	Minus	***		=		X40=		OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM]	405			-		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								OR	+270= TOTAL				
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ADDIT. FEE										ADDIT. FEE			
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													

Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS								RATE	FEE	1	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00	
то	TAL CHARGEA	BLE CLAIMS	minus 20=		*			X\$ 9=		OR	X\$18=		
IND	EPENDENT CL	AIMS	mi	nus 3 =	*			X40=		OR	X80=		
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT		•			+135=		OR	+270=		
* If	the difference	in column 1 is	less than zero, enter "0" in column 2				TOTAL		OR	TOTAL			
CLAIMS AS AMENDED - PART II								101/12		JOH	OTHER	THAN	
	(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST						1 ,	SMALL	NTITY	OR	SMALL		
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NDN	Total	· 10	Minus	** 0	20	=		X\$ 9=		OR	X\$18=		
AME	Independent	NTATION OF M	Minus	***	3 TCLAIM	=		X40=		OR	X80=		
	THOTTHESE	IVIANOIVOI IM			0 0 0 E E	LECC)[]	V/+135=		OR	+270=		
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE		
		(Column 1)		(Colu		(Column 3)				•			
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		PREVI	IBER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
4ME	Independent	*	Minus	***		=]	X40=		OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM]						
							į	+135=		OR	+270=		
							,	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE		
	Commence of the second	(Column 1)		(Colu		(Column 3)	_						
MENT C		CLAIMS REMAINING AFTER AMENDMENT		PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***	T OL 4144	=	┧╏	X40=		OR	X80=		
L	FIRST PRESE	NTATION OF M	ULTIPLE DEI	PENDEN	I CLAIM		┚┟	. 105		·	.070		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT FEE								OR	+270= TOTAL				
**	If the "Highest Nu If the "Highest Nu	mber Previously P mber Previously P	aid For" IN THI aid For" IN THI	S SPACE S SPACE	is less tha is less tha	n 20, enter "20 n 3, enter "3."		ADDIT. FEE			ADDIT. FEE		
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													